


41A720RC-C (10-15)
Commonwealth of Kentucky
DEPARTMENT OF REVENUE

DRAFT
7/23/15
SCH

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of _____

SCHEDULE RC—PART I
CONTINUATION

Name of Entity				Federal Identification Number		Kentucky Corporation/ LLET Account Number (if applicable)		
A	B	C	D	E		F		G
Type of Equipment	Equipment Location (City in Kentucky)	Date of Purchase (Mo., Day, Yr.)	Date of Installation (Mo., Day, Yr.) (see Schedule RC instructions)	Purchase Price		Installation Cost		For Department of Revenue Use Only Approved Amounts from Col. E and F
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Identify the Equipment and Use (see instructions for Schedule RC)								
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